

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Ang</i>	<i>12</i>	<i>10/10/02</i>
O.I.P.E. CLASSIFIER	<i>M. M.</i>	<i>71629</i>	<i>10/17/02</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	5/17/02
2	✓	✓	7/29/02
3	✓	✓	10/25/05
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	✓	✓	
18	✓	✓	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	✓	
23	✓	✓	
24	✓	✓	
25	✓	✓	
26	✓	✓	
27	✓	✓	
28	✓	✓	
29	✓	✓	
30	✓	✓	
31	✓	✓	
32	✓	✓	
33	✓	✓	
34	✓	✓	
35	✓	✓	
36	✓	✓	
37	✓	✓	
38	✓	✓	
39	✓	✓	
40	✓	✓	
41	✓	✓	
42	✓	✓	
43	✓	✓	
44	✓	✓	
45	✓	✓	
46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
16	51	✓	10/25/05
17	52	✓	11/21/05
18	53	✓	
19	54	✓	
20	55	✓	
21	56	✓	
22	57	✓	
23	58	✓	
24	59	✓	
25	60	✓	
26	61	✓	
27	62	✓	
28	63	✓	
29	64	✓	
30	65	✓	
31	66	✓	
32	67	✓	
33	68	✓	
34	69	✓	
35	70	✓	
36	71	✓	
37	72	✓	
38	73	✓	
39	74	✓	
40	75	✓	
41	76	✓	
42	77	✓	
43	78	✓	
44	79	✓	
45	80	✓	
46	81	✓	
47	82	✓	
48	83	✓	
49	84	✓	
50	85	✓	
51	86	✓	
52	87	✓	
53	88	✓	
54	89	✓	
55	90	✓	
56	91	✓	
57	92	✓	
58	93	✓	
59	94	✓	
60	95	✓	
61	96	✓	
62	97	✓	
63	98	✓	
64	99	✓	
65	100	✓	

Claim	Final	Original	Date
106	107	✓	11/26/05
108	109	✓	
110	111	✓	
112	113	✓	
114	115	✓	
116	117	✓	
118	119	✓	
120	121	✓	
122	123	✓	
124	125	✓	
126	127	✓	
128	129	✓	
130	131	✓	
132	133	✓	
134	135	✓	
136	137	✓	
138	139	✓	
140	141	✓	
142	143	✓	
144	145	✓	
146	147	✓	
148	149	✓	
150			

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

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